

CLAIMS ONLY							Application Number 10/624260		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1			/				51				
2				/			52				
3				/			53				
4			/				54				
5				/			55				
6				/			56				
7			/				57				
8				/			58				
9				/			59				
10				/			60				
11			/				61				
12				/			62				
13				/			63				
14				/			64				
15				/			65				
16				/			66				
17							67				
18							68				
19							69				
20							70				
21							71				
22							72				
23							73				
24							74				
25							75				
26							76				
27							77				
28							78				
29							79				
30							80				
31							81				
32							82				
33							83				
34							84				
35							85				
36							86				
37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep			4				Total Indep				
Total Depend			12				Total Depend				
Total Claims			16				Total Claims				